

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 26, 2007 08:00 AM
Secretary of State

DOCUMENT # L67174

1. Entity Name
PACIFIC BUSINESS, INC.



Principal Place of Business
**14249 S.W. 102ND STREET
MIAMI, FL 33186**

Mailing Address
**14249 S.W. 102ND STREET
MIAMI, FL 33186**



02192007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0192055

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WERNER, BERTHA GRACIELA
14249 S.W. 102ND STREET
MIAMI, FL 33186**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

02-19-2007

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U00000649694
03/07/07-80061-005 150.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WERNER, JULIO 14249 S.W. 102ND STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WERNER, JULIO A. 14249 S.W. 102ND STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WERNER, BERTHA GRACIELA 14249 S.W. 102ND STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ALEX R. WERNER 14249 S.W. 102ND STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/19/2007

Date

Daytime Phone #